

CHAPTER 33-14-05 HALFWAY HOUSES, HOSTELS, GROUP HOMES

Section	
33-14-05-01	Standards for Administration
33-14-05-02	Staff
33-14-05-03	Recreational Activities
33-14-05-04	Maintenance
33-14-05-05	Resident Rooms
33-14-05-06	Services Area
33-14-05-07	Resident Dining and Recreation Areas
33-14-05-08	Food Services
33-14-05-09	Fire Safety, Zoning, and Building Clearance
33-14-05-10	Mechanical Requirements
33-14-05-11	Electrical Requirements
33-14-05-12	Submission of Building Construction Plans

33-14-05-01. Standards for administration.

1. **Administrator.** In order to develop an adequate program of treatment and care, it is essential that there be an administrator of maturity and experience to equip the administrator for the task. It is highly recommended that the administrator shall have had at least two years of previous professional work with the mentally retarded or administrative experience of similar duration in an adequate program. Professional preparation and experience in medicine, social work, or psychology are especially desirable. Either an administrator or supervisor of the staff (houseparent) may be in charge of the facility.
2. **Finances.** A sound financial plan must be demonstrated. Adequate records must be kept of all income received and expended. An audit shall be performed annually and a copy of the audit report shall be submitted to the division of mental health and retardation of the state department of health. Financial records may be inspected by the division at any time. Financial records must be kept for a period of fifteen years.
3. **Insurance.** Adequate insurance, including liability insurance, must be maintained.
4. **Health clearance.** The halfway house, hostel, or group home shall secure a written report from a licensed physician or health department that all personnel at the time of employment and annually thereafter are free of communicable and infectious diseases, including tuberculosis. Persons with infectious and communicable disease shall not be on duty in any facility.
5. **Reports.** Licensees shall furnish to the division of mental health and retardation such reports as may be required.

- a. Injury and Incident Reports. A written report shall be submitted to the division within three days concerning any serious injury or unusual incident involving a resident including name, age, sex, date of admission, diagnosis, date of incident of death, nature of incident, medical findings and treatment, name of attending physician, and final disposition.
 - b. Death reports. Reports of all deaths from unnatural causes including those reports to the coroner, shall be submitted to the division either as a special report or by copy of the death certificate within thirty days of occurrence.
 - c. Special reports. Any occurrences such as epidemic outbreaks, poisonings, reportable diseases, or other unusual occurrences which threaten the welfare, safety, or health of any resident admitted to any institution shall be immediately reported by telephone or telegram to the local health officer. The halfway house, hostel, or group home shall furnish such other pertinent information as the local or state department of health may require. The facility shall also immediately submit an identical report to the division.
6. **Fire safety.** All halfway houses, hostels and group homes shall conform to the requirements established by the state fire marshal. An annual inspection shall be made by the state fire marshal, or the fire marshal's designee. A copy of the current fire inspection clearance shall be on the premises.
7. **Disaster program.** All halfway houses, hostels, and group homes shall adopt and maintain a written disaster program which shall provide plans for disasters occurring within and on the grounds of the facility.
- a. The written disaster program shall include:
 - (1) Administrative procedures.
 - (2) Plans for evacuation and continued care of residents.
 - b. The current plan shall be available on the premises and personnel shall be instructed in its implementation.
8. **Telephones.** All halfway houses, hostels, and group homes shall have telephone service, including a telephone accessible to visitors. Each building housing residents shall have telephone or intercommunicating equipment.
9. **Admission policies.** All halfway houses, hostels, and group homes shall have admission policies which are in writing and available to the public. No individual whose needs cannot be met by the facility shall be

admitted to it. All admissions shall be in accordance with the facility's screening team's written policies.

10. **Personnel policies and practices.** All halfway houses, hostels, and group homes shall have written policies and maintain accurate employee records.
11. **Records.** Records shall be kept on all residents admitted and shall be maintained after discharge or after a minor has reached eighteen years of age until such time as the statute of limitations no longer applies.
 - a. Maintenance of resident's records. The halfway house, hostel, or group home shall maintain a separate clinical record for each resident admitted with all entries kept current, dated, and signed. The record shall include:
 - (1) Identification and summary sheets including resident's name, social security number, marital status, age, sex, home address, and religion; name, address and telephone number of referral agency, personal physician, dentist, and next of kin or other responsible person; admitting diagnosis, final diagnosis, conditions on discharge, and disposition.
 - (2) Initial medical evaluation including medical history, physical examination, diagnosis.
 - (3) The physician will make progress notes at each visit and the professional staff at the facility shall write progress notes describing significant changes in the resident's behavior or at least monthly.
 - (4) Physician's orders, including all medication, treatment, diet, restorative, and special medical procedures required for the safety and well-being of the residents.
 - (5) Medication and treatment record including all medications, treatments, and special procedures performed for the safety and well-being of the residents.
 - (6) Laboratory and X-ray reports.
 - (7) Consultation reports.
 - (8) Dental reports.
 - (9) Social service notes.
 - (10) Resident care referral reports.

- b. Confidentiality of records. All information contained in the clinical records shall be treated as confidential and may be disclosed only to authorized persons.
- c. Staff responsibility for records. The facility shall assign one staff member to be responsible for assuring that records are maintained, completed, and preserved.

12. Restraints.

- a. Restraints or seclusion should be used only when all reasonable methods have failed and then should be used only for as brief a period as reasonably possible.
- b. Restraints may be applied only by written order of the attending physician. In case of an emergency a verbal order may be accepted, but must be placed in writing on the resident's record within twelve hours.
- c. When restraint or seclusion is used, a record shall be kept which will show:
 - (1) Name, age, and sex of resident.
 - (2) Type or procedure and device.
 - (3) Justification.
 - (4) Name of authorizing doctor.
 - (5) Date and hour placed in restraint or seclusion.
 - (6) Date and hour removed from restraint or seclusion.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03

33-14-05-02. Staff. At least one staff member shall be in any building in which residents are present at all times. Sufficient personnel staff are to be available for adequate care of residents at all times.

- 1. Arrangements must be demonstrated for the provision of adequate physician's services, including psychiatric and pediatric. If the director is not a physician, there must be services provided by a physician who will give regular health supervision and participate in the training of the staff. Medical services shall be made available as indicated at least every six months and an annual evaluation shall be completed on each resident.

2. Psychological services shall be provided and are to be under the direction of a psychologist licensed to practice psychology in North Dakota in conformity with the North Dakota licensure laws for psychologists. Psychological services shall be made available as indicated at least every six months and an annual evaluation shall be completed on each resident.
3. Social services are to be provided and shall be under the direction of a social worker.
4. Nursing services from registered nurses shall be provided as required by the program. This is especially important when severely handicapped or those with serious medical problems are admitted to the facility. When a professional nurse is included as a part of the staff, the nurse shall provide nursing services and participate in orientation and training of staff.
5. Qualified occupational, recreation, and speech therapists as well as qualified teachers shall be utilized as required.
6. A dietitian must be utilized in the food service. In the event that the facility's program is not large enough to justify including a dietitian as a part of the staff, part-time services of a dietitian or dietetic consultation from the state department of health may be utilized.
7. Provisions shall be made for dental examinations and treatment by a dentist. A dentist shall assist the facility in developing an adequate program of oral hygiene.
8. Professional staff is to be utilized in the orientation and training of personnel.
9. Staff shall possess sufficient maturity and educational achievement to utilize the orientation and training program and to participate in a meaningful treatment and care program for the residents.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03

33-14-05-03. Recreational activities.

1. Every halfway house, hostel, and group home shall provide and conduct programs of purposeful activities in accord and with the interests, abilities, and needs of the residents.
2. Designated indoor and outdoor areas shall be provided to adequately meet the recreational needs of residents.

3. Facilities for children shall provide playgrounds and playrooms, adequately equipped with apparatus, games, etc.
4. Facilities for children of school age shall provide programs of education and training acceptable to the department of public instruction. If school facilities are utilized which are not on the premises, transportation which is in accordance with the needs of the resident shall be provided.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03

33-14-05-04. Maintenance.

1. Paramedical and adjunct services.

- a. Mentally retarded persons who wear glasses, braces, or other appliances shall wear them as directed by the person who prescribed them and the facility shall record these instructions in the resident's record and see that they are carried out.
- b. Adequate facilities shall be made available to provide treatment (such as orthopedic and physiotherapy) by qualified personnel for residents who are physically handicapped in addition to being mentally retarded.
- c. The facility shall have an independent training program which makes every effort to help each resident achieve the resident's fullest potential for independence whether this be independence in self-care or for more complex activities leading to the goal of independent living.
- d. Pharmacy. Where a pharmacy is operated, a registered pharmacist shall be in charge.

2. Medications.

- a. All medications, poisons and other drugs shall be plainly labeled. They shall be stored in a specifically designated and well-illuminated area and made accessible only to responsible persons.
- b. Medications requiring refrigeration shall be stored in a separate refrigerator or a separate section of a refrigerator.
- c. The specific name of the drug shall be plainly indicated on the container.

- d. All medication ordered for residents shall be administered and recorded in accordance with the written order of the attending physician.
- e. Custody of all medications, drugs, and poisons shall be the responsibility of registered nurses or supervisory personnel.
- f. Responsibility for administration of one's own medications by any resident can only be given as part of an approved treatment plan and recorded as such in the resident's record.
- 9. There shall be compliance with state and federal regulations and laws governing use of drugs and narcotics.

3. **Food service.**

- a. Diet plans shall be developed in accordance with good diet practices. They shall be responsive to the special needs of the residents.

At least three meals shall be served daily to all residents either in the facility or made available at school or employment.

- b. Menus shall be planned, written and posted in the kitchen. Copies of menus, as served, shall be kept on file for at least four weeks.
- c. Ambulatory residents shall be provided dining room service. Nonambulatory residents shall be served in such a way as to maximize independence and skills and still maintain an adequate state of nutrition.

4. **Sanitation for preparing and serving food.**

- a. The storage, preparation, and serving of food and the cleaning and sanitizing of utensils shall be in accordance with the Ordinance and Code regulating eating and drinking establishments as recommended by the Public Health Service Food Service Sanitation Ordinance and Code (Part V), Food Service Sanitation Manual. Copies of this manual may be obtained from the state department of health. In lieu thereof, accepted sanitation principles will be followed.
- b. The kitchen area shall provide adequate space for food preparation, dishwashing, refrigeration, and storage of bulk foods.

5. **Milk supply.** The milk supply shall be from an approved source complying with the requirements of the Public Health Service Standard Milk Ordinance.

6. Water supply.

- a. The water supply shall be from an approved source and must meet recognized standards of quality and quantity.
- b. Sufficient facilities for producing a ready quantity of hot water for domestic needs shall be provided.

7. Waste disposal. Disposal of sewage and garbage shall be in an approved manner and must meet recognized standards.

8. Laundry.

- a. Adequate arrangements for laundry service shall be made.
- b. If the laundry is done within the facility, there shall be proper provision of spacing, sizing, and placing of equipment to assure satisfactory service to meet the demands of the residents.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03

33-14-05-05. Resident rooms.

1. In single resident rooms the least dimension free of fixed obstructions shall not be less than eighty square feet [7.43 square meters].
2. Multibed rooms shall have as a minimum sixty square feet [5.57 square meters] of floor space free of fixed obstructions per bed. There shall be no more than four beds per room. A double bunk bed is considered two beds.
3. At least one room with one water closet, lavatory, and tub or shower shall be provided for each five residents.
4. Each resident's room shall be an outside room with a satisfactory amount of natural light.
5. If males and females are housed in the same building, separate water closets, lavatories, and tubs or showers will be required for each.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03

33-14-05-06. Services area.

1. **Clean linen storage.** Enclosed storage space.
2. **Equipment storage room.** For storage of bulky equipment.

3. **Storage.** Ample storage space for resident's personal belongings.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03

33-14-05-07. Resident dining and recreation areas. The dining area and recreational activities area shall not be the same space.

1. **Resident dining area.** The total area set aside for this purpose shall not be less than fifteen square feet [1.39 square meters] per bed. Additional space shall be provided for outpatients if they participate in a day care program.
2. **Resident recreation area.** Ample recreational areas will be provided to meet the program's needs. Twenty square feet [1.86 square meters] per bed is required.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03

33-14-05-08. Food services. Type, size, and layout of equipment shall provide optimal work flow and adequate food preparation to meet the needs of the residents.

1. **Food preparation center.** Provide soap and paper towels for handwashing beside kitchen sink.
2. **Toilet room.** Conveniently accessible for dietary staff.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03

33-14-05-09. Fire safety, zoning, and building clearance. All construction for halfway houses, hostels, and group homes shall conform to state building regulations related to fire safety as well as conform to local fire safety, zoning, and building ordinances. Evidence of conforming to zoning ordinances shall be presented in writing to the division of mental health and retardation. Fire codes and building codes used in the design of the building shall be recorded with plans submitted.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03

33-14-05-10. Mechanical requirements.

1. **Heating and ventilation systems.**
 - a. **Temperatures.** A minimum temperature of sixty-eight degrees to seventy-two degrees Fahrenheit [20 degrees to 22.22 degrees

Celsius] shall be provided for all occupied areas at winter design conditions.

- b. Ventilation. A range hood and mechanical exhausts will be provided in the kitchen area.

- 2. **Plumbing and other piping systems.** All plumbing and piping systems shall conform to state and local plumbing codes.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03

33-14-05-11. Electrical requirements. All electrical equipment will conform to state or local codes.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03

33-14-05-12. Submission of building construction plans. Before construction is begun, plans and specifications covering the construction of new buildings, additions to an existing building or a substantial alteration to an existing building shall be submitted to the division of mental health and retardation and approval shall be obtained from the division with respect to compliance with the minimum standards which have been established.

Note: In order to avoid unnecessary expense in changing final plans, it is suggested that as an initial step, proposed plans in sketch form be reviewed with the division.

General Authority: NDCC 28-32-02

Law Implemented: NDCC 25-16-03